

CLAIMS ONLY							Application Number <i>10669081</i>	Filing Date
Applicant(s)								
May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51	
2		/					52	/
3		/					53	/
4		/					54	/
5		/					55	/
6		/					56	
7	/						57	
8		/					58	
9		/					59	
10		/					60	
11		/					61	
12		/					62	
13	/						63	
14		/					64	
15		/					65	
16		/					66	
17		/					67	
18		/					68	
19	/						69	
20		/					70	
21		/					71	
22		/					72	
23		/					73	
24		/					74	
25	/						75	
26		/					76	
27		/					77	
28		/					78	
29		/					79	
30		/					80	
31	/						81	
32		/					82	
33		/					83	
34		/					84	
35		/					85	
36		/					86	
37	/						87	
38		/					88	
39		/					89	
40		/					90	
41		/					91	
42		/					92	
43	/						93	
44		/					94	
45		/					95	
46		/					96	
47		/					97	
48		/					98	
49	/						99	
50		/					100	
Total Indep	9						Total Indep	
Total Depend	16						Total Depend	
Total Claims	55						Total Claims	